

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

APPLICANT(S)

FILING DATE

07 JUN 2006

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/	/	/		
3		/	/	/		
4		/	/	/		
5		/	/	/		
6		/	/	/		
7		/	/	/		
8		/	/	/		
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36		/	/	/		
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44		/	/	/		
45		/	/	/		
46		/	/	/		
47		/	/	/		
48		/	/	/		
49		3	/	/		
50		3	/	/		
TOTAL IND.	1		1			
TOTAL DEP.	82	←	81	←	←	
TOTAL CLAIMS	83		82			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
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93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.				↓		
TOTAL DEP.				↓		
TOTAL CLAIMS				←		